REMARKS

Claims 1-12, 17-19, 33, 53 and 54 are all the claims pending in the application.

Rejection of Claims 4, 12 and 19 under 35 U.S.C. § 112, Second Paragraph

The Examiner indicated in the Advisory Action of March 23, 2007 that this rejection is maintained because the portions of the specification previously cited by the Applicants only provide "that after the weights are determined to be 1 or 0.5, presumably by a person, that the weights are entered into a database to be automatically applied should the corresponding doctor make a diagnosis to be scored. There is not an automatic means disclosed for determining whether to assign a 1 or 0.5 weight."

In response, Applicants submit that, contrary to the Examiner's position, these claims are clearly supported by the present specification. For example, claim 4 recites, "each of the diagnostic clients is provided with a function of sending data on the doctor in charge together with the individual diagnosis to the server so that the automatic determination means makes examination weighting the individual diagnosis according to the doctor in charge."

As indicated by the Examiner, the specification provides support that the weights are determined to be 1 or 0.5, presumably by a person. Accordingly, when the diagnostic client sends data on the doctor in charge, i.e., "when doctor A sends a diagnosis initiation signal to the server 40 through the network 30 from his or her diagnostic client, the server recognizes that the diagnosis initiation signal is from doctor A," (page 43, lines 23-26) the automatic determination means make examination weighting according to the doctor is charge, i.e. the server 40 receives individual diagnosis on the basis of the input individual diagnoses and <u>weights for the respective</u>

doctors stored in the diagnostic information database, and the result of the automatic examination may be taken as the result of examination." (pages 47-48).

This clearly supports claim 4 because the previously stored weights are automatically assigned to individual diagnoses based on the doctor being recognized by an initiation signal. Consequently, the written description provides clear support that the weights are automatically assigned based on the initiation signal sent by the diagnostic client.
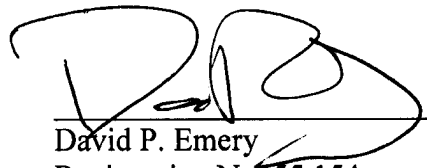
Thus, Applicants submit that this rejection is erroneous and should be withdrawn.

Conclusion

In view of the above, reconsideration and allowance of this application are now believed to be in order, and such actions are hereby solicited. If any points remain in issue which the Examiner feels may be best resolved through a personal or telephone interview, the Examiner is kindly requested to contact the undersigned at the telephone number listed below.

The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

Respectfully submitted,

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